

ART. XVII.—*Summary of the Transactions of the College of Physicians of Philadelphia.*
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THIS number of the proceedings of the college contains even more than the usual amount of interesting matter, and shows that the members of the college are zealously occupied in extending the bounds of our science. In addition to an interesting annual report on meteorology and epidemics by Dr. J. W. Moore, and a very valuable one on the Diseases of Children by Dr. Condie, there are contained in this number some instructive cases communicated by Drs. Hallowell, Meigs, &c.

Every contribution to our knowledge of tubercular diseases is so useful, that we give the following summary of two cases, illustrative of the natural history of that affection communicated by Dr. Hallowell.

CASE I.—A child aged two years and three months, of slender habit, born of healthy, but somewhat emaciated parents, is attacked with measles. This attack is succeeded, after a short interval, by one of bronchitis, of six weeks' duration; the cough, which existed during the measles, having never altogether ceased. Recovering from it, it is found that the child has lost flesh, and has a short dry cough, which was not noticed before. These symptoms continue during a space of fifteen months, when remittent fever prevailing to a great extent, it is attacked with that disease; the physical signs of bronchitis, however, exist in a marked degree, and continue during the whole course of the affection. Two months after recovery from this attack, which lasted a month, it is seized, for the first time, and suddenly, with symptoms of meningitis; the most prominent and characteristic of these signs, are severe pain in the head, and vomiting. The pain in the head continues to increase; slight twitchings of the limbs are noticed, followed by strabismus. To these symptoms succeeds coma, which takes place one week after the commencement of the disease. The following day slight convulsive movements of the left arm are observed: these are somewhat increased on the succeeding day, when the right arm becomes rigid. There is also rigidity of the left ankle joint; the respiration on this and the preceding day, is found to be rude over the whole of the chest, and there is more or less dullness on percussion. These symptoms are followed by a slight amendment, and death finally ensues in about ten days from the time when she first complained of severe pain in the head. The autopsy displays the existence of extensive tuberculous disease. Tubercles are found throughout the lungs, the tissue of which, with the exception of the middle lobe of the right, is red and firmer than natural, but still crepitant to a certain degree. They are found deposited in great abundance, not only in their tissue, but upon the surface beneath the pulmonary pleura, and also beneath the pleura, lining the ribs, but to a small extent. The pleura, in neither of these situations, exhibits any signs of inflammation, except upon the opposing surfaces of the upper and middle lobes of the right lung, which are adherent. The bronchial glands are much enlarged and tuberculous. Tubercles are also found beneath the peritoneal investment of the liver, which presents no sign of inflammation. They are deposited beneath the peritoneal coat of the spleen, and imbedded in its substance: they are found also in the sub-peritoneal tissue of the large intestine, to a limited extent. In the brain they are seen beneath the arachnoid, both upon its convex surface and base; they exist also beneath the arachnoid lining the dura mater, where they are few in number, and isolated for the most part. The arachnoid, in the latter situation, presents its natural appearance, being perfectly pale, and not in the least altered in structure. No trace of inflammation is observed around the granulations, or in their vicinity. The arachnoid of the brain is opaque, owing to the deposit of a milky fluid in the cellular tissue beneath; but is not evidently thickened. The pia mater is greatly injected; less upon the base, where the tubercles are less abundant, but to a much greater degree where the deposit is extensive, viz: in the left fissure of Sylvius; on the surface of the anterior and middle lobes of left side, and more especially on the inner surface of the left hemisphere, and on the convex surface of the posterior lobe of the right. The substance of the brain is healthy.

CASE II.—A child aged seven years, delicate from infancy, enjoys good health until the age of fourteen months, when she has an attack of summer complaint,

with bloody stools lasting three months; two years after, she has an attack of intermittent fever, of three weeks' duration, and in about a year after is affected with varioloid. At the age of four years and a half, she has an attack of pleurisy, for which she is under medical treatment four weeks; during convalescence she is observed to complain of pain in her knee, and shortly after of pain in the hip of the same side; the pain in the knee is intermittent; when severe she is observed to flex the joint, drawing the foot under her chair, and if erect, to rest the limb upon the toes; in the intervals of the attacks of pain, she is able to run about as usual. No treatment is pursued during a space of six months from the first appearance of these symptoms; at the expiration of this time, advice is had, when cups are applied to the hip-joint, which is kept at rest, and she is actively purged with cream of tartar and jalap; this treatment is pursued about a month, when it is proposed to put the limb in a carved splint; this, however, is not done, but she is again sent to school, the flexed position of the limb being now constant; she continues at school during a space of fifteen months. When nearly six years old she has an attack of hooping cough; it continues during the summer months, and leaves her with a short dry cough, which was not noticed previously. When at school, in the autumn of 1839, she receives a fall upon the hip, after which the pain is greatly increased, and she is no longer able to leave the house. Three months after this accident, or about four months before her death, she is first observed to complain of pain in her head; the pain at times is acute, and is most severe during the paroxysms of pain in the joint. Forty days before her death, she has for the first time an attack of convulsions lasting several hours, and affecting the whole body; the pain in the head is increased after this attack, but there is no marked disturbance of the cerebral functions, and she is able to go about the house in her usual manner. For several months her sleep at night is much disturbed, and she has more or less fever every evening; the pain in the hip continues to increase until Wednesday, April 30th, when she is seized with a chill in the morning, followed by high fever and vomiting; the vomiting occurs four or five times on the two first, but less often on the two following days, at the expiration of which it ceases. Three days after the invasion of this attack, she is seized with convulsions, the left arm and leg being affected; the convulsions return at intervals on that and the ten following days, or up to the time of her death; on the 7th, the left arm and leg are observed to be paralyzed, the opposite extremity, on the contrary, being much in motion; during the first week of the attack, she takes notice of surrounding objects, and recognizes her parents; on the 9th, there is complete loss of the power of vision, which was probably the case for several days before; the hearing, however, is acute, and she replies correctly to questions that are put to her; her articulation is indistinct; but the power of deglutition is not impaired; the left shoulder and elbow joints are rigid, and the flexor muscles in a state of strong contraction: the sensibility of the left side is obtuse, and there is a slight rigidity of the left ankle joint; the other joints are supple; the pulse is frequent, irregular and intermittent; the respiration accelerated, the bowels costive; in the night she has a strong convulsion lasting several minutes, and affecting the whole body, followed by hemorrhage from the nose, after which she is unable to speak, and the power of deglutition is much impaired; the cries are less frequent, the stupor constant; on the following day, she has repeated attacks of convulsions, occurring at short intervals; after the first of these, the intelligence appears to have been completely destroyed; when questions are put to her, she takes no notice of them whatever; there is strabismus of both eyes; and the pulse and respiration are increased in frequency; the convulsions on the eleventh assume a tetanic character, the extensors of the upper extremities being thrown into a state of powerful contraction; the motions of the right arm are less frequent, its joints having become rigid, and there is a return of rigidity in the left shoulder and elbow-joints, with slight contraction of the muscles; the neck and lower jaw are also rigid; the pulse continues to increase in frequency, and is diminished in volume; there is marked oscillation of the pupils; coma profound; the bowels continue costive. Death ensues on the 12th, thirteen days from the commencement of the acute attack, characterized by fever, pain in the head, and vomiting. The autopsy presents the following lesions. The pia mater of the convexity of the brain is highly injected, the injection extending to the minutest ramifications;

the arachnoid is pale, and the sub-cellular tissue is slightly infiltrated with a milky serum; beneath it, and apparently imbedded in the pia mater, are numerous granulations, varying in size from a mustard seed to a line or more in diameter; they are more abundant, and of larger size upon the surface of the middle and posterior lobes near their point of contact; but few are seen upon the anterior lobes, where the injection is also less marked; at the base they are found abundantly in the fissures of Sylvius, to a greater extent in the left than in the right, and a few are seen upon the under surface of the middle and posterior lobes, and also beneath the arachnoid lining the dura mater; the base of the brain is but little injected; the pia mater surrounding the optic nerves, is opaque from infiltration, of a milky fluid in its tissue; the substance of the brain is somewhat injected; its consistence is normal throughout; the ventricles contain about an ounce of limpid serum. The lungs are slightly engorged, and with the exception of two very small granulations in the upper lobe of the right side, contain no tubercles; a few granulations are noticed upon the surface of the right pleura, which is adherent throughout. The bronchial glands are tuberculous, and contain a quantity of calcareous matter. The coats of the stomach present a remarkable thinness in its great cul-de-sac, and the mucous follicles are unusually developed; the consistence of the mucous membrane is diminished in the thinned portion, and there is also some softening of the lining membrane of both the small and large intestines; the mucous crypts are likewise very apparent. The mesenteric glands are enlarged but not tuberculous; the bladder contains a quantity of whitish-coloured urine, and its lining membrane is slightly injected and thrown into folds. The liver, spleen, pancreas, and uterus are healthy.

ART. XVIII.—*Report of the Committee on Medical Societies and Medical Colleges relative to the Bill proposing the establishment of an Asylum or School for Idiots, &c.*

THE honour of being the first to lead the way in philanthropic efforts for ameliorating the physical and moral condition of that unfortunate class of human beings, Idiots, whose condition was formerly regarded as utterly hopeless, belongs to the French and the Germans; and the credit of being the first on this side of the Atlantic, in the same laudable enterprise, must be awarded to the enlightened state of New York.

The committee appointed by the legislature of that state, in their report, remark that, they "feel deeply sensible of the great amount of evidence necessary to do away with the strong impression resting in the mind of every man that nothing can be done for the idiot. Such is the universal opinion of all those unacquainted with what has been done, and successfully done for their elevation. But we cannot but believe that sufficient evidence of a satisfactory character has been offered in this report, and the one made by your committee last year, to satisfy any candid mind of the entire feasibility of the project."

In our preceding number, we published a deeply interesting account, by Dr. B. Brown, of the institution for the education of idiots in Berne, and the success which has attended it. In Prussia, equal success has been met with. "So fully assured," says a late German paper, "are the Prussian government of the complete efficacy of the system, that a portion of the Deaf and Dumb Institution at Berlin, is to be set apart as an hospital for idiots, where the most effective methods of education can be tested and carried out. All were imbeciles intrusted to the care of M. Sargent: they were twelve in number. After the lapse of some months, those who could hear, were learning to speak; some were beginning to draw and write, and some to sew; others played most naturally, and sang and danced as other people; all appeared neat and cheerful, improved both in mind and body. A deaf boy, who was one of the worst cases, washed and dressed himself daily without assistance, and was learning to draw; he made his picture upon a slate, and evinced quite a passion for the employment. Most of them appeared in a hopeful way to attain ultimate restoration to the rank and society of rational beings. M. Seguin (of Paris) was also intrusted with the care of ten idiots, who were inmates of the Hospital of Incurables, and who formed the subjects of his expe-